

A Public/Private Partnership Model to Reduce Occupational Dermatitis:

Surveillance, Intervention, and Outcomes

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Establishing the Partnership

➤ Initial collaboration - 1995

- Scope of problem demonstrated
 - Only a small number of dermatitis claims are disabling (involve time loss)
- Opportunity for intervention limited
 - OHD did not have access to employers

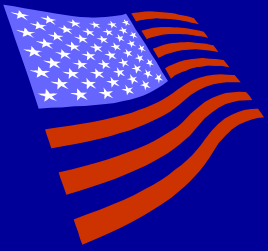


Refining the Partnership

➤ Expanded roles - 1998

- Access to all LNW claims data instituted
- Partnership with Loss Prevention provided opportunity for employer/employee access





Defining the Case: Dermatitis

➤ Definition:

- Injury or illness involving the skin and subcutaneous tissues





Evaluating Claims Data

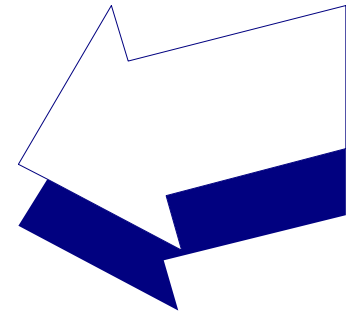
- **Loss Prevention practice**
 - Analyze claims by employer
 - Look at specific time frames

- **Partnership**
 - Analyze claims data for LNW's entire book of business
 - Update claims data file monthly



Examining Claims Data Elements

- **Injury Code - two digit field (NCCI)**
- **Primary/Secondary Diagnosis (ICD-9)**
- **Text fields**
 - **First Accident Description**
 - **Second Accident Description**
 - **Injury Description**





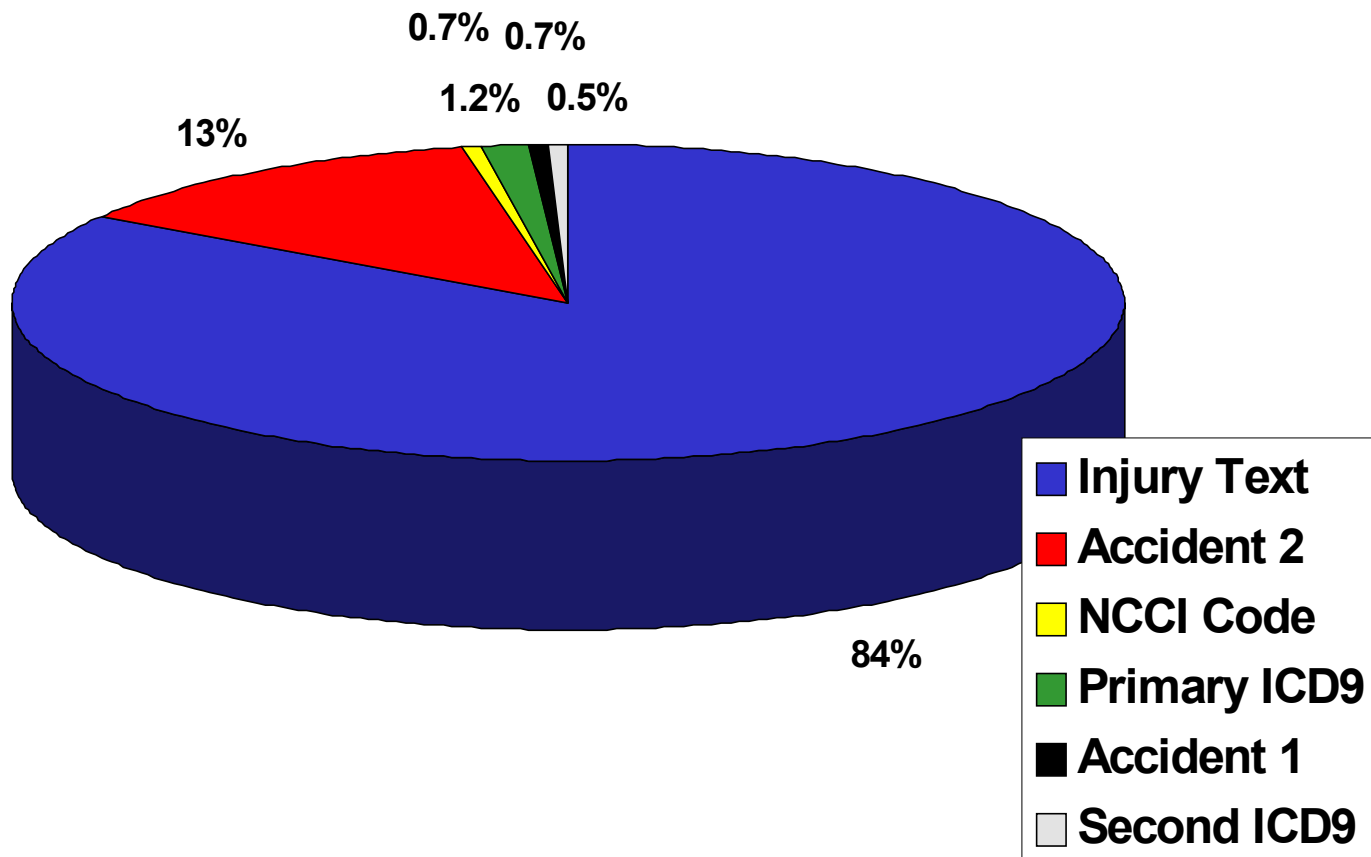
Verifying Data Capture

- Eliminate “false positive”
 - Identify records that may be classified incorrectly

- Eliminate “false negative”
 - Review excluded records to ensure no “dermatitis” claims are excluded



Identification of Dermatitis Cases





Refining the Data

- Definition of “cluster”:
 - Three or more claims for the same type of event in a six-month time frame





Identifying Potential Clusters

- Cluster of claims within an employer
 - 7 clusters of injuries
 - 6 different employers (one employer had 2 clusters)

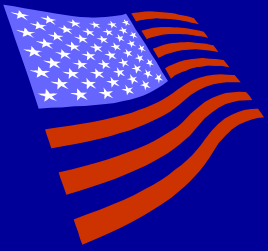
- Cluster of claims by occupation or industry
 - 9 clusters of claims involving 8 codes (NCCI WC&EL classification)



Cluster #1

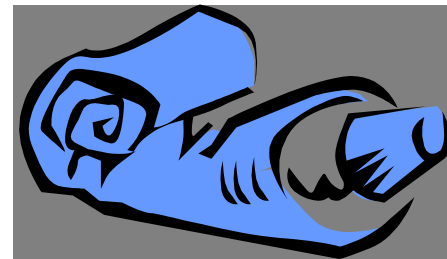
- 10% of dermatitis cases identified in a single employer
 - Employer was a logging company
 - All cases were plant-related dermatitis

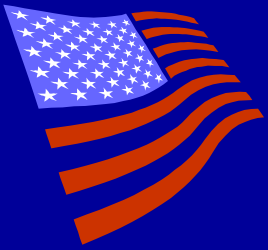




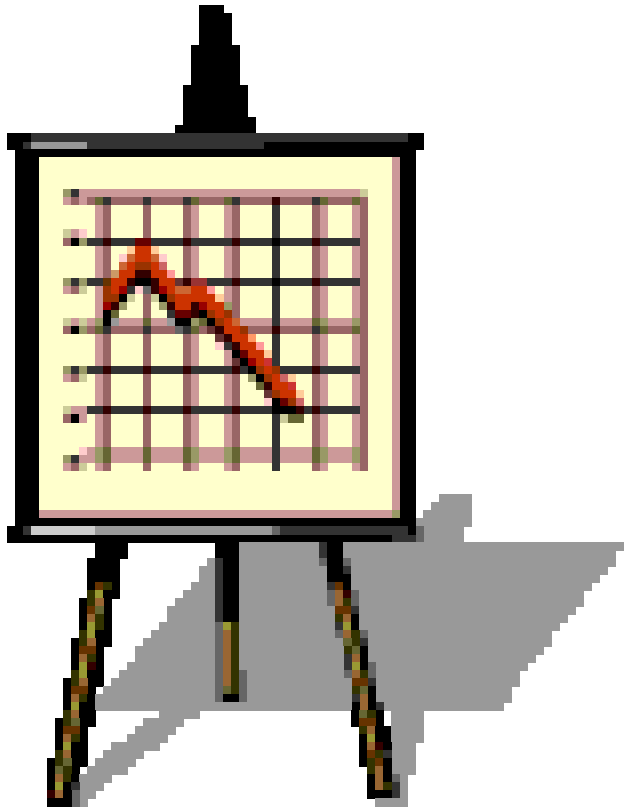
Intervention Strategy #1

- Protocol designed to minimize/eliminate potential for disease
 - Employer agreed to participate
 - Pharmaceutical company provided product and on-site training to logging crew
 - Employer reinforced use of barrier cream and protocol





Intervention #1 Outcome



- During the intervention period zero cases of plant-related dermatitis occurred
 - Employer instituted barrier cream protocol for all operations nationwide



Communicating Results

➤ Contractor News

- Newsletter sent to policyholders in the Pacific Northwest

➤ Fact sheet prepared for Liberty Mutual consulting group





Intervention Strategy #2

- Cluster of latex glove-related dermatitis cases in non-health care setting
- Primary intervention was communication
 - Latex Allergy Alert





Intervention #2 Outcome

- **Significant number of employers/employees notified**
 - **Oregon Restaurant Association**
 - **County Health Inspectors**
 - **Labor Union (UFCW)**



Intervention #2 Outcome

- Employers make conscious, informed decision to purchase non-latex gloves
 - Reduce incidence of occupational injury/illness
 - Reduce risk from liability claims





Benefits

- **Public health perspective**
 - Impact on populations of workers increased
- **More complete and faster analysis of claims data**
- **Focused intervention strategies**
- **Synergistic effect**
 - Identify and leverage strengths of individual partners



Recommendations

- **Involve loss prevention/loss control department**
- **Start small to document value of analysis/intervention strategy**
- **Ensure that IT/Systems departments agree on data variables**
- **Maintain confidentiality of claims data and employer**



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